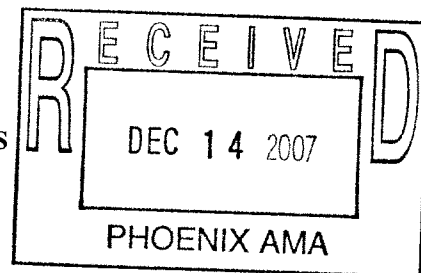


AVRP

ARIZONA DEPARTMENT OF WATER RESOURCES
Water Management Division
3550 North Central Ave, 2nd Floor
Phoenix, Arizona 85012-2105 Phone (602)
771-8585 Fax (602) 771-8689



**APPLICATION FOR UNDERGROUND STORAGE
FACILITY PERMIT (A.R.S. § 45-811.01)**

APPLICATION FEE \$ 750.00 DUE UPON FILING

**PERMIT FEE OF \$ 500.00, PLUS NOTICE AND PUBLICATION FEES
TO BE DETERMINED, WILL BE DUE PRIOR TO ISSUANCE OF
PERMIT**

**PLEASE SUBMIT ONE ORIGINAL AND THREE COPIES OF THE
COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS**

FACILITY DESIGN:(check one)

☒ **Constructed**

☐ **Managed**

APPLICATION FOR: (check one)

☐ **Underground Storage Facility (USF)**

☒ **Modification of USF permit no.:**
71-564896.0001

☐ **Renewal of USF permit no.:**
71-

FOR OFFICE USE ONLY
Application No.: 71-564896.0002
Date Received: 12-14-07

GENERAL INFORMATION

1. Name of Applicant: Central Arizona Water Conservation District

P.O. Box 43020 Phoenix Arizona 85080-3020

Mailing Address City State Zip

Contact Person: Tim Gorey Telephone: (623) 869-2109 Fax: (623) 869-2376

2. Is this a State Demonstration Project? ☒ Yes ☐ No

(NOTE: Pursuant to A.R.S. § 45-893.01, only Conservation Districts qualify to participate in State Demonstration Project program.)

3. Name of Active Management Area or Irrigation Non-Expansion Area where the facility will be located:

Tucson AMA

(If the facility is NOT located within an AMA or INA, please indicate "NONE.")

4. Name of groundwater basin and subbasin where the facility will be located: Avra Valley

5. Legal description of the location of the facility: N1/2 of SW1/4 Section 3, T12S, R11E GSRB&M

(quarter/quarter/quarter/section, township and range – see Appendix C of USF Application Guide)

6. Does the applicant own the land where the facility is to be located? ☐ Yes ☒ No
7. The total design capacity of the facility: 220,000 AF
(acre-feet to be stored over the duration of the USF permit)
8. The maximum annual amount of water proposed for storage at this facility: 11,000 acre-feet per annum
(acre-feet per year)
9. Proposed duration of permit: 20 years
(years)
10. Type of source water to be stored:
☒ CAP Water ☐ Effluent ☐ Decreed and Appropriative Surface Water
 If Decreed and Appropriative Surface Water, list river(s): _____
11. I agree under penalty of law to obtain any required floodplain use permit from the county flood control district before beginning any construction activities, as required by A.R.S. § 45-811.01(C)(4). ☒ Agree ☐ Disagree
12. **For managed USFs where effluent will be stored only:** Are you requesting that this facility be designated as a facility that could add value to a national park, national monument or state park, as described in A.R.S. § 45-811.01(D)?
☐ Yes ☐ No
 If yes, please submit a completed USF Permit Application Supplement to designate a Managed Underground Storage Facility as one that could add value to a national park, national monument, or state park and all additional information as described on the USF Permit Application Supplement.
13. **For permit modifications only,** give a brief description of the modification(s) requested by this application: _____
 See attached letter

SUPPORTING EVIDENCE

Check the following items that have been included with this submittal. For a new USF application, all items **must** be submitted prior to receiving a complete and correct determination by the Department. For a modification to an existing USF permit, submit only those items that apply to the modification. For a full description of these requirements refer to the USF Application Report in the USF Application Guide.

14. USF Site and Facility Characteristics:
- | | |
|---|---------------------------------------|
| <input type="checkbox"/> Site Characteristics | <input type="checkbox"/> Geology |
| <input type="checkbox"/> Facility Characteristics | <input type="checkbox"/> Hydrogeology |
15. Unreasonable Harm and Hydrologic Feasibility Analysis:
- | | |
|--|--|
| <input type="checkbox"/> Procedures and Results for Calculating Maximum Area of Impact and Mounding Analysis | |
| <input type="checkbox"/> Land and Water Use Inventory | <input type="checkbox"/> Unreasonable Harm Analysis <input type="checkbox"/> Monitoring Plan |
| <input type="checkbox"/> Water Quality | <input type="checkbox"/> Hydrologic Feasibility Conclusions <input type="checkbox"/> Operation and Maintenance |

16. Legal Requirements:

☐ Technical Capability

☐ Financial Capability

☐ Legal Access

NOTARIZED SIGNATURE

I (We), LARRY R. DOZIER, the applicant(s) named in this application, do hereby
certify under the penalty of perjury, that the information contained and statements made herein are to the best of my (our)
knowledge and belief true, correct and complete.

623.869.2333

Telephone

Larry R. Dozier
Signature of owner or authorized agent

DEPUTY GENERAL MANAGER

Title

PO Box 43020, PHX AZ 85080

Mailing Address

City

State

Zip

STATE OF ARIZONA

)

) ss.

County of

Maricopa

)

Subscribed and sworn to before me this 4th day of DECEMBER, 20 07

Susan M. Urso
Notary Public

3/14/2010

My commission expires

